



JFW

PATENT
Attorney Docket No. MPA-003

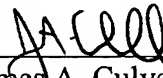
7

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Browning CONFIRMATION 1575
NO.:
SERIAL NO.: 10/510,488 GROUP NO.: 4185
FILING DATE: March 28, 2005 EXAMINER: Burk, Catherine E.
TITLE: Apparatus and Method for Treating Female Urinary Incontinence

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any documents referred to as enclosed herein, are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 23rd day of March, 2009.


James A. Culverwell

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Submitted herewith are:

1. Transmittal Form (1 pg.);
2. Fee Transmittal (1 pg.);
3. Copy of Fee Transmittal (1 pg.);
4. Third Supplemental Information Disclosure Statement (2 pgs.);
5. Form PTO-1449 (4 pgs);
6. Copies of references (B26-B54; C9-C10); and
7. a return receipt postcard.



TRANSMITTAL FORM

Application Serial Number	10/510,488
Filing Date	March 28, 2005
First Named Inventor	Browning
Group Art Unit	4185
Examiner Name	Burk, Catherine E.
Attorney Docket No.	MPA-003
Confirmation No.	1575

ENCLOSURES (check all that apply)

- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form (1 pg.)
<input type="checkbox"/> Check attached
<input checked="" type="checkbox"/> Copy of Fee Transmittal Form

<input type="checkbox"/> Amendment/Response

<input type="checkbox"/> Preliminary
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input type="checkbox"/> Letter to Official Draftsperson
including Drawings
[Total Sheets ____]

<input type="checkbox"/> Petition for Extension of Time

<input checked="" type="checkbox"/> Third Supplemental Information Disclosure Statement (2 pgs.)
<input checked="" type="checkbox"/> Form PTO-1449 (4 pgs.)
<input checked="" type="checkbox"/> Copies of IDS Citations (B26-B54 and C9-C10)

<input type="checkbox"/> Certified Copy of Priority Document(s)

<input type="checkbox"/> Sequence Listing submission
<input type="checkbox"/> Paper Copy/CD
<input type="checkbox"/> Computer Readable Copy
<input type="checkbox"/> Statement verifying identity of above | <input type="checkbox"/> Copy of Notice to File Missing Parts of Nonprovisional Application

<input type="checkbox"/> Formal Drawing(s)

<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal

<input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)

<input type="checkbox"/> Terminal Disclaimer

<input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application

<input type="checkbox"/> Small Entity Statement

<input type="checkbox"/> CD(s) for large table or computer program

<input type="checkbox"/> Amendment After Allowance

<input type="checkbox"/> Request for Certificate of Correction
<input type="checkbox"/> Certificate of Correction (in duplicate) | <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences

<input type="checkbox"/> Appeal Brief (in triplicate)

<input type="checkbox"/> Status Inquiry

<input checked="" type="checkbox"/> Return Receipt Postcard

<input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8

<input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8


<input type="checkbox"/> Additional Enclosure(s) (please identify below) |
|--|--|---|

CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator
K&L Gates LLP
State Street Financial Center
One Lincoln Street
Boston, MA 02111-2950
Tel. No.: (617) 261-3100
Fax No.: (617) 261-3175

SIGNATURE BLOCK

Respectfully submitted,


James A. Culverwell
Attorney for the Applicant
K&L Gates LLP
State Street Financial Center
One Lincoln Street
Boston, MA 02111-2950

Date: March 23, 2009
Reg. No.: 58,175
Tel. No.: (617) 951-9052
Fax No.: (617) 261-3175



PATENT
Attorney Docket No. MPA-003

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Browning CONFIRMATION NO.: 1575
SERIAL NO.: 10/510,488 GROUP NO.: 4185
FILING DATE: March 28, 2005 EXAMINER: Burk, Catherine E.
TITLE: Apparatus and Method for Treating Female Urinary Incontinence

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

THIRD SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Sir:

In accordance with the provisions of 37 C.F.R. 1.97 and 1.98, Applicants hereby make of record the patents and publications listed on the accompanying Form PTO-1449, and other information contained herein, for consideration by the Examiner in connection with the examination of the above-identified patent application. Copies of the non-U.S. patent documents and non-patent publications are enclosed.

REMARKS

In accordance with the provisions of 37 C.F.R. 1.97, this statement is being filed (CHECK ONE):

- ☐ (1) within three (3) months of the **filing date** of a national application other than a continued prosecution application under 37 C.F.R. 1.53(d), or within three (3) months of the **date of entry of the national stage** as set forth in 37 C.F.R. 1.491 in an international application, or before the mailing of the **first Office action** on the merits, or before the mailing of a **first Office action** after the filing of a request for continued examination under 37 C.F.R. 1.114; or
- ☒ (2) after the period defined in (1) above but before the mailing date of any of a **final action** under 37 C.F.R. 1.113, a **notice of allowance** under 37 C.F.R. 1.311, or an action that otherwise closes prosecution in the application, and
- ☐ the requisite Statement is below, OR
- ☒ the requisite fee under 37 C.F.R. 1.17(p), namely \$180.00, is included herein; or

03/30/2009 EFLORES 00000002 501721 10510488

04-FC-1806 180.00 DA

- ☐ (3) after the period defined in (2) above but before the payment of the issue fee, AND
- ☐ the requisite Statement is below, AND
- ☐ the requisite petition fee under 37 C.F.R. 1.17(p), namely **\$180.00** is included herein.

It is respectfully requested that each of the patents and publications listed on the attached Form PTO-1449, and other information contained herein, be made of record in this application.

STATEMENT

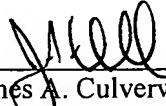
As required under 37 C.F.R. 1.97(e), Applicant(s), through the undersigned, hereby state either that [check the appropriate space only if either (2) or (3) is checked on the previous page and the Statement is required]:

- ☐ 1. Each item of information contained in the Information Disclosure Statement was first cited in any communication from a foreign patent office in a counterpart foreign application **not more than three months** prior to the filing of the Information Disclosure Statement; or
- ☐ 2. No item of information contained in the Information Disclosure Statement was cited in a communication from a foreign patent office in a counterpart foreign application, and, to the knowledge of the person signing this certification after making reasonable inquiry, no item of information contained in the Information Disclosure Statement was known to **any individual** designated in 37 C.F.R. 1.56(c) **more than three months** prior to the filing of the Information Disclosure Statement.

Respectfully submitted,

Date: March 23, 2009
Reg. No. 58,175

Tel. No.: (617) 951-9052
Fax No.: (617) 261-3175



James A. Culverwell
Attorney for the Applicant
K&L Gates LLP
State Street Financial Center
One Lincoln Street
Boston, Massachusetts 02111-2950



FEE TRANSMITTAL FY 2009

Complete if Known	
Application Serial Number	10/510,488
Filing Date	March 28, 2005
First Named Inventor	Browning
Group Art Unit	4185
Examiner Name	Burk, Catherine E.
Attorney Docket No.	MPA-003
Confirmation No.	1575

METHOD OF PAYMENT

1. ☐ Payment Enclosed:
☐ Check ☐ Money Order ☐ Other
2. ☒ The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 50-1721.
☒ Required Fees (copy of this sheet enclosed).
☒ Additional fee required under 37 CFR 1.16 and 1.17.
☒ Overpayment Credit.
3. ☒ Applicant claims small entity status.

FEE CALCULATION

1. FILING/SEARCH/EXAM/SIZE FEES

Large Entity

Fee (\$)	Fee Description	Fee Paid
330	Utility filing fee	
540	Utility search fee	
220	Utility exam fee	
270	Utility size fee (each add'l 50 pgs. over 100)	
220	Design filing fee	
100	Design search fee	
140	Design exam fee	
270	Design size fee (each add'l 50 pgs. over 100)	

	Number Filed	Number Extra	Rate	Amount
Total Claims	- 20 =		x \$ 52.00 =	
Independent Claims	- 3 =		x \$220.00 =	

☐ Multiple Dependent Claim(s), if any

\$390.00 =

TOTAL:

SMALL ENTITY DISCOUNT:

SUBTOTAL (1) (\$ 0.00

2. AMENDMENT CLAIM FEES

Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid
Total	-	=	x \$ 52.00 =	
Indep.	-	=	x \$220.00 =	
<input type="checkbox"/> First Presentation of Multiple Dep. Claim			+ \$390.00 =	

TOTAL: (\$)

SMALL ENTITY DISCOUNT: (\$)

SUBTOTAL (2) (\$ 0.00

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
130	65	Surcharge - late filing fee or oath	
50	25	Surcharge - late provisional filing fee or cover sheet	
130	130	Non-English specification	
2,520	2,520	Request for ex parte reexamination	
130	65	Extension for reply within first month	
490	245	Extension for reply within second month	
1,110	555	Extension for reply within third month	
1,730	865	Extension for reply within fourth month	
2,350	1,175	Extension for reply within fifth month	
540	270	Notice of Appeal	
540	270	Filing a brief in support of an appeal	
1,080	540	Request for oral hearing	
400	400	Petitions to the Commissioner (Gp. I)	
200	200	Petitions to the Commissioner (Gp. II)	
130	130	Petitions to the Commissioner (Gp. III)	
180	180	Submission of Third Supplemental Information Disclosure Statement	180.00
810	405	Filing a submission after final rejection (37 CFR 1.129(a))	
810	405	For each additional invention to be examined (37 CFR 1.129(b))	
100	100	Certificate of Correction for applicant's error	
140	70	Submission of Terminal Disclaimer	
Other fee (Specify)			
Other fee (Specify)			

SUBTOTAL (3) (\$ 180.00

SUBTOTAL (1) 0.00

SUBTOTAL (2) 0.00

SUBTOTAL (3) 180.00

TOTAL (\$ 180.00

CORRESPONDENCE ADDRESS

Direct all correspondence to:

Patent Administrator
K&L Gates LLP
State Street Financial Center
One Lincoln Street
Boston, MA 02111-2950
Tel. No.: (617) 261-3100
Fax No.: (617) 261-3175

SIGNATURE BLOCK

Date: March 23, 2009
Reg. No.: 58,175
Tel. No.: (617) 951-9052
Fax No.: (617) 261-3175

Respectfully submitted,

James A. Culverwell
Attorney for the Applicant
K&L Gates LLP
State Street Financial Center
One Lincoln Street
Boston, MA 02111-2950